Civitan Membership Application

An invitation for membership will be extended only after due consideration of the club in accordance with its Constitution, Bylaws, and policies.

Rock Hill Civitan Club

Please Print:

Name_____

Address_____

City_____

State_____ Zip Code_____

Phone (R) _____

(B) _____

(Cell)_____

email _____

Sponsoring Civitan:_____

I hereby request membership in the Rock Hill Civitan Club. Upon Acceptance, I agree to be subject to its Constitution, Bylaws, and Official Policies. I agree to pay the sum of $30 as an initiation fee, and to pay the regular quarterly dues of $25 to the club, district, and Civitan International as billed by the club. I understand that $2 of my annual dues shall be applied as a subscription to Civitan Magazine. Mail application and check made out to Rock Hill Civitan Club to Rock Hill Civitan Club, 748 Emorywood Ave. Rock Hill, SC 29730

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Applicant's Signature **Date**